

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10/607719 FILING DATE

APPLICANT(S)

CLAIMS

CLM	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1			
2		1		1		
3	1		1			
4		1		1		
5		1		1		
6		1		1		
7	1		1			
8		1		1		
9		1		1		
10		1		1		
11		1		1		
12		1		1		
13		1		1		
14	1		1			
15	1		1			
16	1		1			
17	1		1	1	1	
18	1		1			
19	1		1			
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22	1		1			
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47						
48						
49						
50						
TOTAL IND.	5		5			
TOTAL DEP.	17		17			
TOTAL CLAIMS	22		22			

CLM	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						